



**Testimony of the Connecticut Association of Not-for-profit  
Providers For the Aging**

**Presented to the Committee on Public Health**

**Regarding**

**House Bill 7222, An Act Concerning Use of Unlicensed Assistive Personnel in Residential  
Care Homes**

**March 5, 2007**

*CANPFA members serve thousands of people every day through mission-driven, not-for-profit organizations dedicated to providing the services people need, when they need them, in the place they call home. Our members offer the continuum of aging services: assisted living residences, continuing care retirement communities, residential care homes, nursing homes, home and community based services, and senior housing.*

Good morning Senator Handley, Representative Sayers, and member of the Public Health Committee. My name is Mag Morelli and I am President of the Connecticut Association of Not-for-profit Providers (CANPFA), an organization of 130 mission-driven, not-for-profit providers of care and services for the aging, including 17 residential care homes. We would like to submit this testimony in support of House Bill 7222, *An Act Concerning Use of Unlicensed Assistive Personnel in Residential Care Homes*.

It is our understanding that the intent of this bill is to allow residential care home personnel who have completed the certification requirements for medication administration to assist their residents with the routine monitoring of chronic health care conditions and the intermittent measurement of acute symptoms such as temperature. This would be restricted to the automated digital equipment and monitors that allow residents to keep track of their blood pressure, weight, and temperature, and assisting with routine blood sugar monitoring. A key element of this modification in the law would be the permission to document the measurement for the resident – to simply write down the information in a log or file so that the information can be read by the nurse or physician who will be doing a nursing or medical assessment on the resident at a later date.

We find this a reasonable expansion of the current certification program and one that should help the elderly resident who may need assistance in reading the digital monitoring instruments or writing down the results – and should be even more helpful to the nursing and medical personnel who will be able to read and consider this monitoring information when performing an assessment of the resident's condition.

Thank you for your consideration of this testimony.

Respectfully submitted,

**Mag Morelli, CANPFA President**

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